DECLARATION FOR PATENT APPLICATION

UNITED STATES

Docket No. ~~NECU 20.463~~

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ANTENNA UNIT AND RADIO COMMUNICATION TERMINAL USING THIS ANTENNA UNIT

the specification of which

(check one)   [X] is attached hereto

[ ] was filed on _____ as

Application Serial No. _____

and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

			Priority Claimed
190156/2002	Japan	28/6/2002	(Yes) ~~No~~
(Number)	(Country)	(Day/Month/Year Filed)	
			Yes No
(Number)	(Country)	(Day/Month/Year Filed)	
			Yes No
(Number)	(Country)	(Day/Month/Year Filed)	

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status-patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status-patented, pending, abandoned)

I hereby appoint as my attorney and agent Aaron B. Karas, Reg. No. 18,923, Samson Helfgott, Reg. No. 23,072, Linda S. Chan, Reg. No. 42,400, Michael Markowitz, Reg. No. 30,659, Brian Myers, Reg. No. 49,947, Harris Wolin, Reg. No. 39,432, Shahan Islam, Reg. No. 32,507, Emma Shleifer, Reg. No. 29,734 , Serle Mosoff, Reg. No. 25,900 and Thomas J. Bean, Reg. No. 44,528 to prosecute this application and to transmit all business in the Patent and Trademark Office connected therewith.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the Untied States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor_____ ATSUSHI MUKOYAMA _____

Inventor's Signature _____ *Atsushi Mukoyama* _____ Date_____ June 9, 2003 _____

Residence_____ Tokyo, Japan _____ Citizenship_____ Japanese _____

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Full name of second joint inventor, if any_____

Second Inventor's Signature _____ Date _____

Residence_____Citizenship_____

Post Office Address_____

Full name of third joint inventor, if any_____

Third Inventor's Signature _____ Date _____

Residence_____Citizenship _____

Post Office Address_____

Full name of fourth joint inventor, if any_____

Fourth Inventor's Signature _____ Date _____

Residence_____Citizenship _____

Post Office Address_____

Full name of fifth joint inventor, if any_____

Fifth Inventor's Signature _____ Date _____

Residence_____Citizenship _____

Post Office Address_____

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